

06-26-00

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PATENT
Attorney Docket No. MEDIN1400

06/23/00
jc857 U.S. PTO

☒ NEW PATENT APPLICATION
☐ CONTINUATION-IN-PART
☐ DIVISIONAL

ASSISTANT COMMISSIONER
FOR PATENTS
Box Patent Application
Washington, D.C. 20231

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<u>Mikhail BAYLEY</u>	
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jc832 U.S. PTO
06/23/00

Sir:

Transmitted herewith for filing is the new patent application of

Inventor(s): Ching-San Lai and Tingmin Wang

For: **PROTECTED FORMS OF PHARMACOLOGICALLY ACTIVE AGENTS AND USES THEREFOR**

Enclosed are:

☒ 44 pages of the Specification, which includes 6 pages of the claims.

☒ 1 page of the Abstract;

☒ 3 sheets of drawing(s) ☒ Formal; ☐ Informal;

☒ A Declaration;

☒ Power of Attorney By Assignee;

☒ An assignment of the invention with cover sheet to MEDINOX, INC; and

☒ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 37 C.F.R. 1.27.

09602688-062300

FULL NAME OF FIRST INVENTOR	LAST NAME: Lai	FIRST NAME: Ching-San	MIDDLE NAME: None
CITIZENSHIP	STATE OR FOREIGN COUNTRY: United States		
POST OFFICE ADDRESS	POST OFFICE ADDRESS: 209 Lolita Street	CITY AND STATE: Encinitas, CA	ZIP CODE: 92024
FULL NAME OF SECOND INVENTOR	LAST NAME: Wang	FIRST NAME: Tingmin	MIDDLE NAME: None
CITIZENSHIP	STATE OR FOREIGN COUNTRY: People's Republic of China		
POST OFFICE ADDRESS	POST OFFICE ADDRESS: 585 Sonoma Street	CITY AND STATE: San Marcos, CA	ZIP CODE: 92069

The filing fee has been calculated as shown below:

For	Number Filed		Number Extra		Rate			Fee	
					Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	33	=	13		\$9	\$18	=	\$117.00	\$ 0
Independent Claims	7	=	4		\$39	\$78	=	\$156.00	0
Multiple Dependent Claims Presented: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					\$130	\$260			0
BASIC FEE					\$345	\$690		\$345.00	\$ 0
TOTAL FEE								\$618.00	\$ 0

☐ The payment of the filing fee is to be deferred until the Declaration is filed. Do not charge our deposit account.


☒ The Commissioner is authorized to charge payment in the amount of \$658.00; \$345.00 for the filing fee, \$273.00 for the additional independent claims and \$40.00 for the recordation of one (1) assignment and any other fees associated with this communication or credit any overpayment to Deposit Account No. 07-1895. A duplicate copy of this sheet is enclosed.

☒ Any additional filing fees required under 37 C.F.R. 1.16.

☒ Any patent application processing fees under 37 C.F.R. 1.17.

Respectfully submitted,

Date: 6/23/00


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